### Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 26/09/2018 17:21

#### SINGAPORE ACCIDENT STATEMENT

#### **IMPORTANT NOTICE**

Occupation

**Date Of Driving Pass** 

**Driving Experience** 

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available

	A COURTNIE OF A TEMENT
	ACCIDENT STATEMENT
Date Of Report	26/09/2018 17:11
Date Of Accident	10/09/2018 18:50
Exact Location Of Accident	AIRPORT ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SKD8314R
nsured/Policyholder	
Name Of Registered Owner	VERONICA TAN WAN YEE (CHEN WANYU)
NRIC No	S7716245C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98367550
Alternative Phone No	Others-98367550
Vehicle Particulars	
Manufacturer	RENAULT
Model	MEGANE-HATCH 1.6 (A)
Exact Purpose for which vehicle was being used at ime of accident	
Are you claiming under your own insurance policy or repair to your vehicle?	NO
f No, Please state action to be taken	REPORTING ONLY
/ehicle Category	PRIVATE CAR
nsurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100286111
Cover Note Number	
Driver	
Name of Driver	TJAN PIN ANN DARREN FRANCIS
NRIC No	S7514204H
Date Of Birth	19/05/1975

**INDOOR** 

09/11/1995

22 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97390480

Fax Number

**Contact Number** 

EMail Address NOEMAIL

Address BLK 117 EDGEFIELD PLAINS #02-316

**SINGAPORE** 

Postcode 820117
Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

\_

Insurance Company of Driver's Own Vehicle

-

NO

NO

1

#### **General Information of the Accident**

Type Of Accident NO COLLISION

Weather Conditions CLEAR
Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

#### **Details of Police Action**

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name PUNGGOL N.P.C

Police Station Address ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

### **Circumstances of Accident**

REFER TO THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

NO

#### Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

#### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SLZ2673R

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims:
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

KETCH PLAN		
		<u>Vehicle</u>
		A -
		В-
		Legend
		Z A
		P P
		b
		Vehicle Motorcycle
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
	refer to police repo	urt.
	refer to police repo	) ( )
	1	
DECLARATION		
I/We declare the foregoing part	ticulars are true in every respect.	st own policy must be made within the stipulated timeframe
from the day of occurrence. Kindly che	eck your policy for more details.	11000
	DADUO)	Mod
Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder)	Name:
	Date & Time:	Name: NRIC/FIN No.: DUWW





Date of Expiry:

Police Station Of Origin: Punggol N.P.C

21A Tebing Lane SINGAPORE 828837

Tel No: 1800-6049999

Occupation:

CORPORATE TRAINER

1 of 3 Report No. T/20180926/2105

#### REPORT OF A TRAFFIC ACCIDENT Date/Time Report Made: Vide Report No.: Station Diary No.: 26/09/2018 15:42 32 Informant's Particulars Name of Informant: Address: TJAN PIN ANN DARREN FRANCIS APT BLK 117 EDGEFIELD PLAINS #02-316 SINGAPORE 820117 ID Type / ID No.: Contact No.: NRIC NO / S7514204H Home/Office: Mobile: 97390480 Email: Nationality: SINGAPORE CITIZEN Sex: Age: Date of Birth: Type of Informant: Male 43 19/05/1975 Driver Race: Institution / School Name: Language:

Driving Licence Information:

Class: 3

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 10/09/2018 18:50		Type of Location Straight Road
Location: Along Road 1 AIRPORT RO Weather: Clear		Road Surface: Dry		Road	d Speed Limit:
-1		Traffic Control:			
Traffic Flow: Dual Carriage	e Way	Not Controlled		Heav	

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKD8314R	Car				No Damage	0
SLZ2673R						0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





T/20180926/2105

Police Station Of Origin: Punggol N.P.C

21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

Report No. T/20180926/2105

CONTINUATION OF REPORT

Driver						
Name	TJAN PIN ANN DARREN FRANCIS			ID No		S7514204H
Related Vehicle	SKD8314R (Car)			Conta	ct No.	97390480
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date Dis			charge	NIL	
No. of Days gran	ted Medical Leave NIL Degr			f Injury	NIL	

#### Brief Details.

On 14/09/2018, I received a letter from the Traffic Police reference TP/IP/52533/2018. The letter mentioned that I was involved in a traffic accident along Airport Road on 10/09/2018 at 1850hrs. I then contacted investigation officer Esther Chong and she informed me to lodge a traffic accident report first. She also gave me the other party's vehicle registration number as SLZ2673R. I wish to state that I have no knowledge of any accident that occurred on that particular day and I often utilise that stretch of road. I made a check on my vehicle and it did not reveal any damages to indicate that I had been involved in a traffic accident. My car is not equipped with an in-car camera.





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 3 of 3 Report No. T/20180926/2105

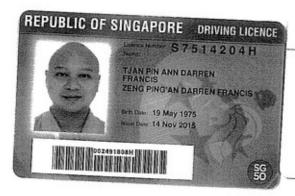
CONTINUATION OF REPORT

### Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Reco F / Staff Sgt MUHAMMAD AC AKHTAR		1)	Signature Of Inform	nant:
Signature Of Interpreter: Not applicable	¥		Date/Time: 26/09/2018 15:42	
Officer In Charge Of Case TP / GIA /			Classification Of C	ase:
Staff Sgt WONG SIEU LU Contact No.: 65476151	See	n	SN 085	
Authentication Stamp NP168	Singapore F	olice F	orce	



# REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7514204H



TJAN PIN ANN DARREN FRANCIS (ZENG PING'AN DARREN FRANCIS)

CHINESE Oate of birth Sex 19-05-1975 M

Country of birth SINGAPORE

57514204H

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES) EFFECTIVE DATE

Motor Cars =< 3000kg with =<7 passengers, exclusive 09 Nov 1995 of the driver; and other motor vehicles =< 2500kg

NP 428A

(

Licence No:S7514204H

NRICN+S7514204H

Date of Issue 16-05-2006

APT BLK 117 EDGEFEELD PLAINS #02 – 316 SINGAPORE 820117 NRIC No: \$7514204H Date: 21 – 07 – 2007 No: \$786109

























